

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		WFW	5/4/01
FORMALITY REVIEW	fa	720	06-19-01
RESPONSE FORMALITY REVIEW	MR	825	8/24/01

INDEX OF CLAIMS

✓ Rejected
= Allowed
- (Through numeral)..... Canceled
÷ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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